PTORBAG (12-04)

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U.S. Pesent and Tradentark Office; U.S. DEPARTMENT OF COMMERCE

Under the Perenwork Reduction Act of 1995, no persons are required to respond to a confection of Information unless it displays a valid ONB control number.

PATENT APPLICATION FEE DETERMINATION DECORD PATENT APPLICATION FEE DETERMINATION RECORD **Substitute for Form PTO-875** OTHER THAN APPLICATION AS FILED - PART I OR SMALL ENTITY **SMALL ENTITY** (Column 2) (Cotumn 1) FEE (1) · NUMBER FRED RATE (1) HUMBER EXTRA RATE A FOR BASIC FEE DI CFR 1.46(4), (6).44 (4) NA NIA . N/A SEARCH FEE NA N/A DT CFR 1.16(4). (1). OF (114) H/A EXAMENATION FEE NA NVA N/A (1) CFR 1.16(4), (6). or (4) TOTAL CLAIMS OR minus 20 = 07 CFR 1.16(1) HOEPENDENT CLAIMS ... t eurim (H)21.1 TFO TG If the specification and drawings exceed 100. streets of paper, the application size too due APPLICATION SIZE b \$250 (\$125 for small entity) for each additional 60 effects or fraction thereof. See (1) CFR 1.16(+)) 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s) N'A MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.160) NIA JATOT If the difference in column 1 is less than zero, order "0" in column 2. APPLICATION AS AMENDED - PART II OTHER THAN OR SWALL ENTITY SMALL ENTITY (Cotatin 2) (Column 3) (Column 1) HIGHEST CLAIMS RATE (1) ADDI-PRESENT RATE (\$) ADDL REMARKING NUMBER TIONAL TIONAL PREVIOUSLY EXTRA AFTER FEE (3) FEE (1) PAID FOR AMENDMENT Minus total properties **O**R MUNU G Minus Oft AppRication State Fee (37 CFR 1.16(6)) NVA FIRST PRESENTATION OF MATERIE DEPENDENT CLAIM DI GER 1.100) K'A TOTAL TOTAL ar ADD'L FEE ADOL FEE (Column 3) (Column 1) (Column 2) HIGHEST CLAIKS RATE (1) PRESENT RATE (1) ADDI. HUMBER REMADING LAHOHT EXTRA TIONAL  $\mathbf{\omega}$ PREVIOUSLY PAID FOR FEE (S) AFTER FEE (\$) AMENDMENT Z t units OR = Total CT CTR 1.16(# ENDM Minus Independent OT CER LIGH ÖR Application Size Fee (37 CFR 1.16(3)) HUA FIRST PRESENTATION OF MULTIPLE OCPENDENT CLAIM (3) CFR 1.16(1) OR TUA LATOT TOTAL OR ADDIFEE ADD'L FEE • If the entry in column 1 is less than the entry in column 2, write "O" in column 3.

\*\* If the Highest Number Previously Paid For IN THIS SPACE is less than 20, enter "20".

\*\* If the Highest Humber Previously Paid For IN THIS SPACE is less than 3, enter "3".

The Highest Number Previously Paid For (Total or Independent) is the highest number found in the appropriate box in column 1.

This collection of information is required by 37 CFR 1.16. The information is required to obtain or retain a benefit by the public which is to file (and by LINE CONSCION OF MICHAELEN TO LEGISLATION TO RECOMPLETED FORMS TO MAINTAIN TRANSPORT TO THE PROPERTY OF THE PR ADDRESS SEND TO: Commissioner for Palents, P.O. Box 1450, Alexandria, VA 22313-1460.